2012 EXCERPTS

PRISON POLICY INITIATIVE
Recipient Committee
Campaign Statement
Cover Page
(Government Code Sections 84200-84210.5)

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.

☒ Officeholder, Candidate Controlled Committee
☐ State Candidate Election Committee
☐ Recall
(Also Complete Part 2)
☐ General Purpose Committee
☐ Sponsored
☐ Small Contributor Committee
☐ Political Party/Central Committee
☐ Primarily Formed Ballot Measure Committee
☐ Controlled
☐ Sponsored
(Also Complete Part 6)
☐ Primarily Formed Candidate Officeholder Committee
(Also Complete Part 7)

2. Type of Statement:
☐ Preselection Statement
☒ Semi-annual Statement
☐ Termination Statement
☐ Amendment (Explain below)
☐ Quarterly Statement
☐ Special Odd-Year Report
☐ Supplemental Preselection Statement - Attach Form 495

3. Committee Information

COMMITEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE): Friends of Sheriff Scott Jones 2014

I.D. NUMBER: 121236

STREET ADDRESS (NO P.O. BOX): 3304 Saxonville Way
CITY: Antelope
STATE: CA
ZIP CODE: 95843
AREA CODE/PHONE: 916-564-8022

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX:
PC Box 1137
CITY: Sacramento
STATE: CA
ZIP CODE: 95812
AREA CODE/PHONE:

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executive on 1-30-13
Executor on 1-30-13
Executor on 1-30-13

Signature of Treasurer or Assistant Treasurer:

Signature of Controlling Officer/Candidate, State Measure Proponent or Responsible Officer of Sponsor:

Signature of Controlling Officer/Candidate, State Measure Proponent:

FPPC Form 460 (January 05)
FPPC Toll-Free Helpline: 888/ASK-FPPC (888/275-3772)
State of California
# Schedule A (Continuation Sheet)
Monetary Contributions Received

**Type or print in ink. Amounts may be rounded to whole dollars.**

**NAME OF FILER**
Friends of Sheriff Scott Jones 2014

**DATE RECEIVED** | **FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR** (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | **CONTRIBUTOR CODE** | **IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER** (IF SELF-EMPLOYED ENTER NAME OF BUSINESS) | **AMOUNT RECEIVED THIS PERIOD** | **CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)** | **PER ELECTION TO DATE (IF REQUIRED)**
--- | --- | --- | --- | --- | --- | ---
10/04/2012 | PASCO 100 Box 419074 Rancho Cordova, CA 95742 | ☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | | 2,000.00 | 2,000.00 | 
10/04/2012 | Matthew kiss 1364 Fitch Way Sacramento, CA 95864 | ☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | Consultant | 550.00 | 550.00 | 
10/04/2012 | Securus Technologies 1461 Dallas Parkway Dallas, TX 75254 | ☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | Ross & Associates | 10,000.00 | 10,000.00 | 
10/05/2012 | Douglas A. Searches 740 Oak Ave. Parkway, #120 Folsom, CA 95630 | ☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | Attorney | 550.00 | 550.00 | Adams & AMP
10/10/2012 | PPP Commercial 90 Box 1144 Sloughhouse, CA 95683 | ☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | | 2,500.00 | 2,500.00 | 

**SUBTOTAL** $15,600.00

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*Contributor Codes:
- IND – Individual
- COM – Recipient Committee (other than PTY or SCC)
- OTH – Other (e.g., business entity)
- PTY – Political Party
- SCC – Small Contributor Committee

FPPC Form 460 (January/06)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

www.netfile.com
2013 EXCERPTS
Recipent Committee
Campaign Statement
Cover Page
(Government Code Sections 84200-84218.5)

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.
   [x] Officeholder, Candidate Controlled Committee
   □ State Candidate Election Committee
   □ Recall
   (Also Complete Part 5)
   □ General Purpose Committee
   □ Sponsored
   □ Small Contributor Committee
   □ Political Party/Central Committee
   □ Primarily Formed Candidate/Officeholder Committee
   (Also Complete Part 7)

2. Type of Statement:
   □ Prelection Statement
   □ Semi-annual Statement
   □ Termination Statement
   (Also file a Form 410 Termination)
   □ Amendment (Explain below)
   □ Quarterly Statement
   □ Special Occasion
   □ Supplemental Prelection Statement - Attach Form 495

3. Committee Information
   I.D. NUMBER
   432123

   COMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
   Friends of Sheriff Scott Jones 2014

   STREET ADDRESS (NO P.O. BOX)
   2336 Saxony Way
   City
   State
   Zip Code
   Area Code/Phone

   CITY
   State
   Zip Code
   Area Code/Phone

   Mailing Address (If Different) No. And Street Or P.O. Box
   PO Box 1237
   CITY
   State
   Zip Code
   Area Code/Phone

   Optional: FAX / E-MAIL ADDRESS

4. Verification
   I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

   Executed on 07/01/2013
   Date

   Executed on 12/31/2013
   Date

   By
   Signature of Treasurer or Assistant Treasurer

   By
   Signature of Controlling Officier, Candidate, State Measure Proponent or Responsible Officer of Sponsor

   By
   Signature of Controlling Officier, Candidate, State Measure Proponent

   By
   Signature of Controlling Officier, Candidate, State Measure Proponent

   FPPC Form 460 (January/05)
   FPPC Toll-Free Helpline: 866/ASK-FPPC (866/397-3772)
   State of California
## Schedule A
### Monetary Contributions Received

**Types or print in ink, amounts may be rounded to whole dollars.**

**Statement covers period from** 07/01/2013 **through** 12/31/2013

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR</th>
<th>CONTRIBUTOR CODE</th>
<th>IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
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<td>07/26/2013</td>
<td>Sacramento County Deputy Sheriffs Association PAC (#78)</td>
<td>IND</td>
<td>President</td>
<td>15,000.00</td>
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<td>Lehr Electric</td>
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<td>President</td>
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<td>08/12/2013</td>
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<td>Dallas, TX 75254</td>
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</table>

**Schedule A Summary**

1. Amount received this period – itemized monetary contributions.
   (Include all Schedule A subtotals.) .................................................. $ 198,930.00

2. Amount received this period – unitemized monetary contributions of less than $100 ................................ $ 6,313.56

3. Total monetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) .................................. TOTAL $ 215,243.56

**Contributor Codes**
- IND - Individual
- COM - Recipient Committee
- OTH - Other (e.g., business entity)
- PTY - Political Party
- SCC - Small Contributor Committee

*FFPC Form 460 (January 06)*

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

www.netfile.com
2014 EXCERPTS
Recipient Committee
Campaign Statement
Cover Page
(Government Code Sections 84200-84216.5)

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.
   ☑ Officeholder, Candidate Controlled Committee
   ☑ State Candidate Election Committee
   ☑ Recall (Also Complete Part 6)
   ☑ General Purpose Committee
     ☑ Sponsored
     ☑ Small Contributor Committee
   ☐ Primarily Formed Ballot Measure Committee
     ☑ Controlled
     ☑ Sponsored (Also Complete Part 6)
   ☐ Primarily Formed Candidate/Officeholder Committee (Also Complete Part 7)

2. Type of Statement:
   ☐ Preliminary Statement
   ☑ Semi-annual Statement
   ☑ Termination Statement (Also file a Form 410 Termination)
   ☐ Amendment (Explain below)

3. Committee Information
   I.D. NUMBER 1321236
   COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
   Friends of Sheriff Scott Jones 2014
   STREET ADDRESS (NO P.O. BOX)
   3336 Sacramento Way
   CITY
   Antelope
   STATE CA
   ZIP CODE 95843
   AREA CODE/PHONE (812) 804-9002
   MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX
   PO Box 1337
   CITY
   Sacramento
   STATE CA
   ZIP CODE 95812
   AREA CODE/PHONE
   OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification
   I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
   Executed on 1/26/15
   By,
   Signature of Treasurer or Assistant Treasurer
   Executed on 1/23/15
   By
   Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor
   Executed on
   By
   Signature of Controlling Officeholder, Candidate, State Measure Proponent
   Executed on
   By
   Signature of Controlling Officeholder, Candidate, State Measure Proponent

www.netfile.com
<table>
<thead>
<tr>
<th>Date</th>
<th>Full Name, Street Address and Zip Code of Contributor</th>
<th>Contributor Code</th>
<th>If an Individual, Enter Occupation and Employer (If Self-Employed, Enter Name of Business)</th>
<th>Amount Received This Period</th>
<th>Cumulative to Date Calendar Year (Jan. 1 - Dec. 31)</th>
<th>PER Election To Date (If Required)</th>
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<td>Joseph Church 5636 Wood Stork In. GRANT, FL 32949</td>
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<td>Pres. Digital Shield</td>
<td>1,500.00</td>
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<td>P2018 $1,500.00</td>
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<td>09/17/2014</td>
<td>Celebrite 7 Campus Dr., #210 PARSIPPANY, NJ 07054</td>
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<td>Linda Smolich 3140 J St. SACRAMENTO, CA 95816</td>
<td>IND</td>
<td>Director Lincoln Law School</td>
<td>1,500.00</td>
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<td>09/27/2014</td>
<td>Donald Destina 1133 Pennsylvania St. DENVER, CO 80203</td>
<td>IND</td>
<td>Manager Trinity Services Group</td>
<td>1,000.00</td>
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SUBTOTAL $19,000.00